Sustomer Number:

000201

Attorney Docket Number:

C6655(C)

Applicant:

Nancy A. Falk

For:

SHRINK SLEEVED BOTTLE

Express Mail Label No.:

ER 761 555 232 US

Date Deposited:

December 31, 2003

UNUS #:

03-D236-EDG/D

Assignee:

Unilever Home & Personal Care USA

To:

Commissioner for Patents

**Box: Patent Application** 

P.O. Box 1450

Alexandria, VA 22313-1450

## **APPLICATION ELEMENTS**

- [X] Fee Calculation (Box 13) and Authorization (Triplicate copies of this form are enclosed) 1.
- [X] Specification and Claims (7) Total Pages 2.
- 3. [X] Informal Drawings (1) Total Sheets
- [X] Executed Declaration 4.
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - Computer Readable Copy
  - Paper copy (identical to computer copy)
  - Statement verifying identify of above copies.

## **ACCOMPANYING APPLICATION PARTS**

- [ ] Information Disclosure Statement (IDS)/PTO-1449 6.
- Copies of IDS citations ٠7.
- [ ] Preliminary Amendment 8.
- [X] Two (2) Return Receipt Postcards
- -10. [ ] Certified Copy of Priority Document
- The benefit under 35 U.S.C. § 119 is claimed of the filing of: 11. []
- Other: 12.
- 13. [X] The FILING FEE (including any claims introduced or cancelled by Preliminary Amendment) is calculated below:

FOR	NUMBER FILED		NUMBER EXTRA		RATE	BASIC FEE \$770.00
Total Claims	7 - 20			X	\$ 18.00	
Independent Claims	1-3			X	\$ 88.00	
Multiple Claims	Yes	<u>No</u>		x	\$290.00	
TOTAL FILING FEE						\$770.00

14. [X] Charge \$770.00 to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.
15. [X] The Commissioner is hereby authorized to charge any additional fees, which may be recommended. The Commissioner is hereby authorized to charge any additional fees, which may be required, including all required fees under

[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17;

[X] 37 C.F.R. § 1.18.

16. [X] Correspondence Address:

Customer Number: 000201

Respectfully submitted,

Kevin J. Stein

Attorney of Record

Reg. # 47,966

KJS/pod (201) 840-2394